

**December 2009 - Claims Submitted to Medicaid - Jonathon**

Recip Original ID	Recip F.L.
9824	Jonathon

Pay to Prov Name	Treating Prov Name	Claim Billed	Claim Paid
BIG HORN BASIN MENTAL HEALTH	BIG HORN BASIN MENTAL HEALTH	01/26/10	02/03/10

Proc Code	Line First Svc Date	Line Last Svc Date	Line Billed Units of Svc	Hours Billed	Line Paid Amt	\$/Hour Billed
H2021	12/01/09	12/31/09	24	6.00	\$672.00	\$112.00

**Total For Month**                      **6.00**                      **\$672.00**  
**Average Per Day**                      **0.19**                      **\$21.68**

Pay to Prov Name	Treating Prov Name	Claim Billed	Claim Paid
NORTHWEST WYOMING TREATMENT CENTER	NORTHWEST WYOMING TREATMENT CENTER	01/26/10	02/03/10

Proc Code	Line First Svc Date	Line Last Svc Date	Line Billed Units of Svc	Hours Billed	Line Paid Amt	\$/Hour Billed
H0005	12/01/09	12/31/09	134	33.50	\$1,457.92	\$43.52
H0047	12/01/09	12/31/09	302	75.50	\$8,456.00	\$112.00
H2015	12/01/09	12/31/09	684	171.00	\$5,130.00	\$30.00

**Total For Month**                      **280.00**                      **\$15,043.92**  
**Average Per Day**                      **9.03**                      **\$485.29**

**Seized Progress Notes & Supervision Sheets**

Proc Code	Hours Recorded	Hours Billed	Difference	Comments
H0005	33.50	33.50	0.00	December 2009, procedural codes and hours submitted with January 25, 2010 therapy notes.
H0047	75.50	75.5	0.00	
H2015	171.00	171	0.00	
H2021	6.00	6.00	0.00	

29 pgs. NWTC Client Supervision sheet-no procedure code.